

ONLINE ACCOUNT REGISTRATION FORM

	New Account		Account Amendment			
Date	e of Request:					
Nam	lame of Company:					
Lice	icense Number:					
	Name of Authorized Person (only one): Shareholder / Manager only)					
Des	Designation:					
SMS	S Mobile:					
Ema	il:					

DECLARATION

We declare that the details given above are true and correct, in case of any changes and amendments we undertake to inform HFZA. We undertake to hold HFZA harmless for any liability whatsoever in the above regard.

All shareholders sign here:		
Name & Signature	Name & Signature	Name & Signature
Name & Signature	Name & Signature	Company Seal / Stamp